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| U.S. APPLICATION NO. <b>10/575848</b> INTERNATIONAL APPLICATION NO. <b>PCT/EP2004/003494</b>                                                                                                                           |               | ATTORNEYS DOCKET NUMBER<br><b>2360 0968US</b>                                                                                        |                                            |
| 17. The following fees are submitted:                                                                                                                                                                                  |               | CALCULATIONS      PTO USC Only                                                                                                       |                                            |
| <b>Basic National Stage Fee</b>                                                                                                                                                                                        | <b>\$ 300</b> |                                                                                                                                      |                                            |
| <b>National Stage Search Fee</b>                                                                                                                                                                                       | <b>\$ 400</b> |                                                                                                                                      |                                            |
| <b>National Stage Examination Fee</b>                                                                                                                                                                                  | <b>\$ 200</b> |                                                                                                                                      |                                            |
| <b>ENTER APPROPRIATE BASIC FEE AMOUNT =</b>                                                                                                                                                                            |               | <b>\$ 900</b>                                                                                                                        |                                            |
| Surcharge of \$130.00 for furnishing the oath or declaration later than <u>20</u> <u>30</u> months from the earliest claimed priority date (37 CFR 1.492(e)).                                                          |               | <b>\$</b>                                                                                                                            |                                            |
| CLAIMS                                                                                                                                                                                                                 | NUMBER FILED  | NUMBER EXTRA                                                                                                                         | RATE                                       |
| Total claims                                                                                                                                                                                                           | 15 - 20 =     | 0                                                                                                                                    | X \$ 50.00      \$                         |
| Independent claims                                                                                                                                                                                                     | 1 - 3 =       | 0                                                                                                                                    | X \$ 200.00      \$                        |
| MULTIPLE DEPENDENT CLAIM(S) (if applicable)                                                                                                                                                                            |               |                                                                                                                                      | + \$ 360      \$                           |
| <b>TOTAL OF ABOVE CALCULATIONS</b>                                                                                                                                                                                     |               |                                                                                                                                      | <b>\$ 900</b>                              |
| Reduction by 1/2 for filing by small entity, if applicable.                                                                                                                                                            |               |                                                                                                                                      | <b>\$</b>                                  |
| <b>SUBTOTAL</b>                                                                                                                                                                                                        |               |                                                                                                                                      | <b>\$ 900</b>                              |
| Processing fee of \$130.00 for furnishing the English translation later than <u>20</u> <u>30</u> months from the earliest claimed priority date (37 CFR 1.492(f)).                                                     |               |                                                                                                                                      | <b>\$</b>                                  |
| <b>TOTAL NATIONAL FEE</b>                                                                                                                                                                                              |               |                                                                                                                                      | <b>\$ 900</b>                              |
| Fee for recording the enclosed assignment (37 CFR 1.21(h)). The assignment must be accompanied by an appropriate cover sheet (37 CFR 3.28, 3.31). \$40.00 per property                                                 |               |                                                                                                                                      | <b>\$ 40</b>                               |
| <b>TOTAL FEES ENCLOSED</b>                                                                                                                                                                                             |               |                                                                                                                                      | <b>\$ 940</b>                              |
|                                                                                                                                                                                                                        |               |                                                                                                                                      | Amount to be:<br>refunded \$<br>charged \$ |
| a. <u>    </u> A check in the amount of \$ <u>                    </u> to cover the above fees is enclosed.                                                                                                            |               |                                                                                                                                      |                                            |
| b. <u> X </u> Please charge my Deposit Account No. <u>50 1030</u> in the amount of \$ <u>940</u> to cover the above fees.                                                                                              |               |                                                                                                                                      |                                            |
| c. <u> X </u> The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment to Deposit Account No. <u>50 1030</u> . A duplicate copy of this sheet is enclosed. |               |                                                                                                                                      |                                            |
| <b>NOTE:</b> Where an appropriate time limit under 37 CFR 1.494 or 1.495 has not been met, a petition to revive (37 CFR 1.137(a) or (b)) must be filed and granted to restore the application to pending status.       |               |                                                                                                                                      |                                            |
| <b>Please send all correspondence to: Customer Number 29894</b>                                                                                                                                                        |               |                                                                                                                                      |                                            |
| Dr. Paul Vincent<br>Dreiss, Fuhlendorf, Steimle & Becker<br>Postfach 10 37 62<br>D-70032 Stuttgart<br>Fed.Rep. of Germany                                                                                              |               | SIGNATURE: <u>Paul Vincent</u><br>DATE: <u>April 11, 2006</u><br>NAME: <u>Dr. Paul Vincent</u><br>REGISTRATION NUMBER: <u>37,461</u> |                                            |